

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

American Hospital Association PAC

ADDRESS (number and street)

325 Seventh Street, NW

Suite 700

☐Check if different
than previously
reported. (ACC)

Washington

DC

20004

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00106146

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☒

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

02

01

2007

through

02

28

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Ms. Melinda Hatton

Signature of Treasurer

Electronically Filed by Ms. Melinda Hatton

Date

03

19

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
American Hospital Association PAC

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2007	1038787.58
(b) Cash on Hand at Beginning of Reporting Period	992061.83	
(c) Total Receipts (from Line 19)	24305.69	103554.89
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1016367.52	1142342.47
7. Total Disbursements (from Line 31)	63307.82	189282.77
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	953059.70	953059.70
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

American Hospital Association PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	2	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	2	2	8	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	6421.12	23321.12
(i) Itemized (use Schedule A)		
(ii) Unitemized	2545.43	10632.71
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	8966.55	33953.83
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤	8966.55	38953.83
12. Transfers From Affiliated/Other Party Committees	15000.00	63900.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	339.14	701.06
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	24305.69	103554.89
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	24305.69	103554.89

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	307.82	532.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	307.82	532.77
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	63000.00	188500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	250.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	63307.82	189282.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	63307.82	189282.77

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	8966.55	38953.83
34. Total Contribution Refunds (from Line 28(d))	0.00	250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8966.55	38703.83
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	307.82	532.77
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	307.82	532.77

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Laura Caramanica

Mailing Address 5 Virginia Lane

City State Zip Code
 Unionville CT 06085-1140

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hartford Hospital

Occupation
Vice President Nursing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 0 1 / 2 0 0 7

Transaction ID: 13677064

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. David Marshall

Mailing Address 1319 Walhni Street

City State Zip Code
 Galveston TX 77555-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Texas Medic-
al Branch Hos

Occupation
Assistant Vice President & Chief Nursi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 0 1 / 2 0 0 7

Transaction ID: 13677065

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Ms. Katherine B. Harris

Mailing Address 4108 Meinning Road

City State Zip Code
 Berthoud CO 80513-8579

FEC ID number of contributing
federal political committee.

C

Name of Employer
Banner Health, Western Re-
gion

Occupation
Regional Vice President, Clinical Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 0 1 / 2 0 0 7

Transaction ID: 13677066

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

A. Full Name (Last, First, Middle Initial)
Ms. Rosemary Ann Roth
Mailing Address 237 Forgham Road

City State Zip Code
Rochester NY 14616-3334

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rochester General Hospital

Occupation
Director Surgical Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 0 7

Transaction ID: 13677067

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Ms. Pamela T. Rudisill
Mailing Address 17225 Royal Court Dr.

City State Zip Code
Davidson NC 28036-7843

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lake Norman Regional Medi-
cal Center

Occupation
Associate Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 0 7

Transaction ID: 13677068

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Ms. Michelle Janney
Mailing Address 1828 W. Long Valley Road

City State Zip Code
Glenview IL 60025-5042

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Memorial Hos-
pital

Occupation
VP/Chief Nurse Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 0 7

Transaction ID: 13677069

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Kathleen D. Sanford, RN, DBA

Mailing Address 2659 Syracuse Court

City State Zip Code
 Denver CO 80238-2421

FEC ID number of contributing
federal political committee.

C

Name of Employer
Catholic Health Initiatives

Occupation
Senior Vice President & CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 0 1 / 2 0 0 7

Transaction ID: 13677070

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Ms. Joan Clark

Mailing Address 8196 SW 180th Street

City State Zip Code
 Village Of Palmett FL 33157-6179

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baptist Hospital of Miami

Occupation
Chief Nursing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 0 1 / 2 0 0 7

Transaction ID: 13677071

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Ms. Linda Q. Everett

Mailing Address 3045 Forest Ridge Drive NE

City State Zip Code
 Iowa City IA 52240-7908

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Iowa Hospitals and Clinics

Occupation
Chief Nursing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 1 2 / 2 0 0 7

Transaction ID: 13726477

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

A. Full Name (Last, First, Middle Initial)
Mr. Paul F. Pendergast

Mailing Address 95 Woodland Street

City State Zip Code
Hartford CT 06105-1230

FEC ID number of contributing
federal political committee.

C

Name of Employer
Saint Francis Care, Inc.

Occupation
President & Chief Development Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 2 / 2 0 0 7

Transaction ID: 13727004

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Mr. Kurt A Barwis

Mailing Address Brewster Road

City State Zip Code
Bristol CT

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bristol Hospital

Occupation
President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 2 / 2 0 0 7

Transaction ID: 13727005

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
Ms. Nancy Foster

Mailing Address 10005 Leafy Avenue

City State Zip Code
Silver Spring MD 20910-1021

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Hospital Association-Washingt

Occupation
Vice President, Quality & Patient Safe

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 0 / 2 0 0 7

Transaction ID: 13769742

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

A. Full Name (Last, First, Middle Initial)
Dr. Janis Kohlbrenner
Mailing Address 103 Thorndike Lane

City State Zip Code
Minoa NY 13116-1127

FEC ID number of contributing
federal political committee.

C

Name of Employer
St. Joseph's Hospital Health Center

Occupation
Vice President, Clinical Services & CN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 0 / 2 0 0 7

Transaction ID: 13769747

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Mr. Dwight L. Fine
Mailing Address 12675 Riviera Heights Road

City State Zip Code
Holts Summit MO 65043-2039

FEC ID number of contributing
federal political committee.

C

Name of Employer
Missouri Hospital Association

Occupation
Sr. Vice President, Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.24

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 0 / 2 0 0 7

Transaction ID: 13781200

Amount of Each Receipt this Period

111.12

C. Full Name (Last, First, Middle Initial)
Mr. Richard E. Meiers
Mailing Address 908 Hokulani Street

City State Zip Code
Honolulu HI 96825-1021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Healthcare Association of Hawaii

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 6 / 2 0 0 7

Transaction ID: 13820560

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

861.12

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

A. Full Name (Last, First, Middle Initial)
Ms. Elizabeth T. Beaudin, RN, MS, CN

Mailing Address 69 Day Street

City State Zip Code
 Granby CT 06035-2901

FEC ID number of contributing federal political committee.

C

Name of Employer
Connecticut Hospital AssociationOccupation
Director, Nursing & Work Force Initiat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 2 6 / 2 0 0 7

Transaction ID: 13824047

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Dr. Carol A. Watson, Ph.D., RN

Mailing Address 701 10th Street, SE

City State Zip Code
 Cedar Rapids IA 52403-1292

FEC ID number of contributing federal political committee.

C

Name of Employer
Mercy Medical CenterOccupation
Sr. Vice President, Clinical Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 2 6 / 2 0 0 7

Transaction ID: 13824049

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
Mr. Alexander R. White, Jr.

Mailing Address PO Box 15587

City State Zip Code
 Austin TX 78761-5587

FEC ID number of contributing federal political committee.

C

Name of Employer
American Hospital AssociationOccupation
AHA Regional Executive for TX

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.69

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 2 1 / 2 0 0 7

Transaction ID: 13824429

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

810.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 12 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

A. Full Name (Last, First, Middle Initial) Ms. Carol Hergenhan		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 7	
Mailing Address 7600 Central Avenue		Transaction ID: 13824590	
City Philadelphia	State PA	Zip Code 19111-2442	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Jeanes Hospital	Occupation Trustee		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
B. Full Name (Last, First, Middle Initial) Mr. Nemuel O Ariles, , FACHE		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 0 7	
Mailing Address Post Office Box 10011		Transaction ID: 13869060	
City Guayama	State PR	Zip Code 00785-4011	Amount of Each Receipt this Period -250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Hospital Episcopal Cristo Redentor	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00		
		Bounced Check	

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

6421.12

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 13 / 39

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

A. Full Name (Last, First, Middle Initial)
Health Alliance of PA PAC - Federal

Mailing Address Post Office Box 8600

City State Zip Code
Harrisburg PA 17105-8600

FEC ID number of contributing
federal political committee.

C C00128082

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 6 / 2 0 0 7

Transaction ID: 13833069

Amount of Each Receipt this Period

15000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

15000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 39

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

A.

Full Name (Last, First, Middle Initial)

Citibank, F.S.B.

Mailing Address 1400 G Street, NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

701.06

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 0 7

Transaction ID: 13862664

Amount of Each Receipt this Period

339.14

Bank Interest

SUBTOTAL of Receipts This Page (optional)

339.14

TOTAL This Period (last page this line number only)

339.14

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Merchant Bankcard

Mailing Address 1601 Elm Street

City
Dallas

State
TX

Zip Code
75201

Purpose of Disbursement
Bank Fee

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 13862666

Date of Disbursement

02 / 05 / 2007

Amount of Each Disbursement this Period

81.83

Bank Fee

Full Name (Last, First, Middle Initial)

B. Merchant Bankcard

Mailing Address 1601 Elm Street

City
Dallas

State
TX

Zip Code
75201

Purpose of Disbursement
Bank Fee

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 13862668

Date of Disbursement

02 / 06 / 2007

Amount of Each Disbursement this Period

128.01

Bank Fee

SUBTOTAL of Disbursements This Page (optional)

209.84

TOTAL This Period (last page this line number only)

209.84

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Pascrell For Congress Inc.

Mailing Address P.O. Box 640

City
Totowa

State
NJ

Zip Code
07511

Purpose of Disbursement
Contribution

Candidate Name
Rep. William J. Pascrell, Jr.

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 8

Transaction ID: 13713650

Date of Disbursement

02 / 07 / 2007

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Hoyer For Congress

Mailing Address 7905 Malcolm Road Suite 102

City
Clinton

State
MD

Zip Code
20735

Purpose of Disbursement
Contribution

Candidate Name
Rep. Steny H. Hoyer

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 5

Transaction ID: 13713271

Date of Disbursement

02 / 07 / 2007

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Collins For Senator

Mailing Address PO Box 1096

City
Bangor

State
ME

Zip Code
04402

Purpose of Disbursement
Contribution

Candidate Name
Sen. Susan M. Collins

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: ME District: 2

Transaction ID: 13713270

Date of Disbursement

02 / 07 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Delahunt For Congress Committee

Mailing Address 332 Victory Road

City Quincy State MA Zip Code 02171

Purpose of Disbursement
Contribution

Candidate Name
Rep. William D. Delahunt

Office Sought: ☒ House
☐ Senate
☐ President

State: MA District: 10

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 13713626

Date of Disbursement

02 / 07 / 2007

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

B. McConnell Senate Committee '08

Mailing Address PO Box 1496

City Louisville State KY Zip Code 40201

Purpose of Disbursement
Contribution

Candidate Name
Sen. Mitch McConnell

Office Sought: ☐ House
☒ Senate
☐ President

State: KY District: 2

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 13713635

Date of Disbursement

02 / 07 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. McConnell Senate Committee '08

Mailing Address PO Box 1496

City Louisville State KY Zip Code 40201

Purpose of Disbursement
Contribution

Candidate Name
Sen. Mitch McConnell

Office Sought: ☐ House
☒ Senate
☐ President

State: KY District: 2

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 13713637

Date of Disbursement

02 / 07 / 2007

Amount of Each Disbursement this Period

3500.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. LoBiondo For Congress

Mailing Address PO Box 775

City
Marmora

State
NJ

Zip Code
08223

Purpose of Disbursement
Contribution

Candidate Name
Rep. Frank A. LoBiondo

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 2

Transaction ID: 13713638

Date of Disbursement

02 / 07 / 2007

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Porter For Congress

Mailing Address PO Box 26087

City
Las Vegas

State
NV

Zip Code
89126

Purpose of Disbursement
Contribution

Candidate Name
Rep. Jon C. Porter

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 3

Transaction ID: 13713627

Date of Disbursement

02 / 07 / 2007

Amount of Each Disbursement this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mark Pryor For U.S. Senate

Mailing Address PO Box 2720

City
Little Rock

State
AR

Zip Code
72203

Purpose of Disbursement
Contribution

Candidate Name
Sen. Mark L. Pryor

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 2

Transaction ID: 13713651

Date of Disbursement

02 / 07 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Citizens For Altmire

Mailing Address PO Box 1776

City
Freedom

State
PA

Zip Code
15042

Purpose of Disbursement
Contribution

Candidate Name
Mr. Jason Altmire

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 4

Transaction ID: 13713625

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. John D. Dingell For Congress Committee

Mailing Address 607 14th Street N.W.
Suite 800

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
Contribution

Candidate Name
Rep. John D. Dingell

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 15

Transaction ID: 13730729

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Capuano For Congress Committee

Mailing Address PO Box 440305

City
Somerville

State
MA

Zip Code
02144

Purpose of Disbursement
Contribution

Candidate Name
Rep. Michael E. Capuano

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 8

Transaction ID: 13730727

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. ROYB - Rely on Your Beliefs FundMailing Address 1300 Pennsylvania Avenue, NW
Suite 700

City Washington State DC Zip Code 20004

Purpose of Disbursement
2007 Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 13730713

Date of Disbursement

M M / D D / Y Y Y Y
0 2 / 1 2 / 2 0 0 7

Amount of Each Disbursement this Period

2500.00

2007 Contribution

Full Name (Last, First, Middle Initial)

B. Stupak For CongressMailing Address 817 Ninth Avenue
PO Box 143

City Menominee State MI Zip Code 49858

Purpose of Disbursement
ContributionCandidate Name
Rep. Bart Stupak011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 1

Transaction ID: 13730720

Date of Disbursement

M M / D D / Y Y Y Y
0 2 / 1 2 / 2 0 0 7

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Upton For All Of Us

Mailing Address P.O. Box 490

City St. Joseph State MI Zip Code 49085

Purpose of Disbursement
ContributionCandidate Name
Rep. Fred Upton011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 6

Transaction ID: 13730726

Date of Disbursement

M M / D D / Y Y Y Y
0 2 / 1 2 / 2 0 0 7

Amount of Each Disbursement this Period

1500.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 39

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Bob Filner For Congress

Mailing Address P.O. Box 127868

City
San Diego

State
CA

Zip Code
92112

Purpose of Disbursement
Contribution

Candidate Name
Rep. Bob Filner

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 51

Transaction ID: 13730723

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Kind For Congress Committee

Mailing Address 205 South 5th Ave
Suite 428

City
La Crosse

State
WI

Zip Code
54601

Purpose of Disbursement
Contribution

Candidate Name
Rep. Ron Kind

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 3

Transaction ID: 13730717

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Diana DeGette For Congress Inc.

Mailing Address P.O. Box 61337

City
Denver

State
CO

Zip Code
80206

Purpose of Disbursement
Contribution

Candidate Name
Rep. Diana DeGette

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 1

Transaction ID: 13730725

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. RED PAC

Mailing Address 437-B New Jersey Ave., SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
2007 Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 13730411

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

2007 Contribution

Full Name (Last, First, Middle Initial)

B. Braley For Congress

Mailing Address PO Box 390

City Waterloo State IA Zip Code 50704

Purpose of Disbursement
Contribution

Candidate Name
Mr. Bruce Braley

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: IA District: 1

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 13730728

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Frelinghuysen For Congress

Mailing Address 19 Cattano Avenue

City Morristown State NJ Zip Code 07960

Purpose of Disbursement
Contribution

Candidate Name
Rep. Rodney P. Frelinghuysen

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 11

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 13753488

Date of Disbursement

02 / 15 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Committee for Leadership and Progress

Mailing Address Post Office Box 31107

City Bethesda State MD Zip Code 20824

Purpose of Disbursement
2007 Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 13752673

Date of Disbursement

02 / 15 / 2007

Amount of Each Disbursement this Period

1000.00

2007 Contribution

Full Name (Last, First, Middle Initial)

B. Chambliss For Senate

Mailing Address Post Office Box 12469

City Atlanta State GA Zip Code 30355

Purpose of Disbursement
Contribution

Candidate Name
Sen. Saxby Chambliss

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

State: GA District: 1

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 13752676

Date of Disbursement

02 / 15 / 2007

Amount of Each Disbursement this Period

1500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Gillibrand For Congress

Mailing Address P.O. Box 1279

City Hudson State NY Zip Code 12534

Purpose of Disbursement
Contribution

Candidate Name
Kirsten Gillibrand

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: NY District: 20

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼
2006 General Debt Re

Transaction ID: 13753339

Date of Disbursement

02 / 15 / 2007

Amount of Each Disbursement this Period

2500.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Becerra For Congress

Mailing Address P.O. Box 261060

City
Los Angeles

State
CA

Zip Code
90026

Purpose of Disbursement
Contribution

Candidate Name
Rep. Xavier Becerra

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 31

Transaction ID: 13753493

Date of Disbursement

02 / 16 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Friends Of Roy Blunt

Mailing Address PO Box 50100

City
Springfield

State
MO

Zip Code
65805

Purpose of Disbursement
Contribution

Candidate Name
Rep. Roy Blunt

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District: 7

Transaction ID: 13753495

Date of Disbursement

02 / 16 / 2007

Amount of Each Disbursement this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Friends Of Senator Carl Levin

Mailing Address 10 G Street Ne, Suite 470

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Contribution

Candidate Name
Sen. Carl Levin

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 1

Transaction ID: 13753491

Date of Disbursement

02 / 16 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Michael Burgess For Congress

Mailing Address PO Box 2334

City
Denton

State
TX

Zip Code
76202

Purpose of Disbursement
Contribution

Candidate Name
Rep. Michael C. Burgess, M.D.

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 26

Transaction ID: 13753492

Date of Disbursement

02 / 16 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Herseth For Congress

Mailing Address PO Box 2009

City
Sioux Falls

State
SD

Zip Code
57101

Purpose of Disbursement
Contribution

Candidate Name
Rep. Stephanie Herseth

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: SD District: 1

Transaction ID: 13754267

Date of Disbursement

02 / 16 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Texans For Henry Cuellar Congressional Campaign

Mailing Address 1519 Washington Street
2nd Floor Suite 200

City
Laredo

State
TX

Zip Code
78042

Purpose of Disbursement
Contribution

Candidate Name
Rep. Henry Cuellar

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 28

Transaction ID: 13754268

Date of Disbursement

02 / 16 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Moving America Forward

Mailing Address P.O. Box 25

City
Great Falls

State
VA

Zip Code
22066

Purpose of Disbursement
2007 Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 13753490

Date of Disbursement

02 / 16 / 2007

Amount of Each Disbursement this Period

1000.00

2007 Contribution

Full Name (Last, First, Middle Initial)

B. Rangel For Congress

Mailing Address PO Box 5577
Manhattanville Sta

City
New York

State
NY

Zip Code
10027

Purpose of Disbursement
Contribution

Candidate Name
Rep. Charles B. Rangel

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 15

Transaction ID: 13789655

Date of Disbursement

02 / 22 / 2007

Amount of Each Disbursement this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Northern Lights PAC

Mailing Address 1537 Shipsview Road

City
Annapolis

State
MD

Zip Code
21401

Purpose of Disbursement
2007 Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 13789621

Date of Disbursement

02 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

2007 Contribution

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Pallone For Congress

Mailing Address PO Box 3176

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement
Contribution

Candidate Name
Rep. Frank Pallone, Jr.

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 6

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 13789654

Date of Disbursement

02 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Friends Of Kent Conrad

Mailing Address PO Box 812

City Bismarck State ND Zip Code 58502

Purpose of Disbursement
2012 Contribution

Candidate Name
Sen. Kent Conrad

Office Sought: ☐ House
☒ Senate
☐ President

State: ND District: 1

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 13789650

Date of Disbursement

02 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

2012 Contribution

Full Name (Last, First, Middle Initial)

C. Next Century Fund

Mailing Address 116 South Royal Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
2007 Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 13789624

Date of Disbursement

02 / 22 / 2007

Amount of Each Disbursement this Period

3000.00

2007 Contribution

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Paul Hodes For Congress

Mailing Address 26 South Main Street, #253

City Concord State NH Zip Code 03301

Purpose of Disbursement
Contribution

Candidate Name
Rep. Paul W. Hodes

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NH District: 2

Transaction ID: 13789656

Date of Disbursement

02 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Earl Pomeroy For Congress

Mailing Address P.O. Box 9336

City Fargo State ND Zip Code 58106

Purpose of Disbursement
Contribution

Candidate Name
Rep. Earl Pomeroy

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: ND District: 1

Transaction ID: 13833797

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Friends Of Roger Wicker

Mailing Address P.O. Box 874

City Tupelo State MS Zip Code 38802

Purpose of Disbursement
Contribution

Candidate Name
Rep. Roger F. Wicker

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MS District: 1

Transaction ID: 13833804

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Kirk For Congress

Mailing Address P.O. Box 8

City
Winnetka

State
IL

Zip Code
60093

Purpose of Disbursement
Contribution

Candidate Name
Rep. Mark Steven Kirk

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 10

Transaction ID: 13833813

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Walsh For Congress Committee

Mailing Address 306 Winkworth Parkway

City
Syracuse

State
NY

Zip Code
13215

Purpose of Disbursement
Contribution

Candidate Name
Rep. James T. Walsh

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 25

Transaction ID: 13833815

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Solis For Congress

Mailing Address 6380 Wilshire Blvd. #1612

City
Los Angeles

State
CA

Zip Code
90048

Purpose of Disbursement
Contribution

Candidate Name
Rep. Hilda L. Solis

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 32

Transaction ID: 13833802

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Moran For Kansas

Mailing Address P.O. Box 1151

City
Hays

State
KS

Zip Code
67601

Purpose of Disbursement
Contribution

Candidate Name
Rep. Jerry Moran

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: KS District: 1

Transaction ID: 13833810

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. People For Pete Domenici

Mailing Address Post Office Box 93656

City
Albuquerque

State
NM

Zip Code
87199

Purpose of Disbursement
Contribution

Candidate Name
Sen. Pete V. Domenici

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NM District: 1

Transaction ID: 13833787

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin For Congress

Mailing Address P.O. Box 696

City
Madison

State
WI

Zip Code
53701

Purpose of Disbursement
Contribution

Candidate Name
Rep. Tammy Baldwin

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 2

Transaction ID: 13833809

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Sam Farr for Congress

Mailing Address 1010 S Street

City
Sacramento

State
CA

Zip Code
95814

Purpose of Disbursement
Contribution

Candidate Name
Rep. Sam Farr

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 17

Transaction ID: 13833790

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Boswell For Congress

Mailing Address PO Box 6220

City
Des Moines

State
IA

Zip Code
50309

Purpose of Disbursement
Contribution

Candidate Name
Rep. Leonard L. Boswell

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: IA District: 3

Transaction ID: 13833793

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Melissa Bean For Congress

Mailing Address Post Office Box 3068

City
Barrington

State
IL

Zip Code
60010

Purpose of Disbursement
Contribution

Candidate Name
Rep. Melissa L. Bean

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 8

Transaction ID: 13833812

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

500.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Longhorn PAC

Mailing Address 228 S. Washington St.
Suite B-20

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
2007 Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 13833786

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

2007 Contribution

Full Name (Last, First, Middle Initial)

B. Heartland Values PAC

Mailing Address P.O. Box 505

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement
2007 Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 13833785

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

2000.00

2007 Contribution

Full Name (Last, First, Middle Initial)

C. Loeb sack For Congress

Mailing Address 385 E. College St.

City Iowa City State IA Zip Code 52240

Purpose of Disbursement
Contribution

Candidate Name
Mr. David Loeb sack

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: IA District: 2

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 13833795

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

2000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Kirk For Congress

Mailing Address P.O. Box 8

City
WinnetkaState
ILZip Code
60093Purpose of Disbursement
Void of 9/06 checkCandidate Name
Rep. Mark Steven Kirk011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: IL District: 10

2006 General Congres

Transaction ID: 13867279

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	0	7

Amount of Each Disbursement this Period

-3000.00

Void of 9/06 check

Full Name (Last, First, Middle Initial)

B. Committe To Re-Elect Ed Towns

Mailing Address 438 Lewis Avenue

City
BrooklynState
NYZip Code
11233Purpose of Disbursement
Void of 9/06 checkCandidate Name
Rep. Edolphus Towns011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: NY District: 10

2006 Primary Congres

Transaction ID: 13867277

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	0	7

Amount of Each Disbursement this Period

-4000.00

Void of 9/06 check

Full Name (Last, First, Middle Initial)

C. Spratt For Congress Committee

Mailing Address PO Box 830

City
YorkState
SCZip Code
29745Purpose of Disbursement
Void of 1/07 CheckCandidate Name
Rep. John M. Spratt, Jr.011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: SC District: 5

Transaction ID: 13862465

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	0	7

Amount of Each Disbursement this Period

-2500.00

Void of 1/07 Check

SUBTOTAL of Disbursements This Page (optional)

-9500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Weldon Victory Committee

Mailing Address P. O. Box 1992

City Media State PA Zip Code 19063

Purpose of Disbursement
Void of 9/06 check

Candidate Name
Mr. W Curtis Weldon

Office Sought: ☒ House
☐ Senate
☐ President

State: PA District: 7

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

2006 General Congres

Transaction ID: 13867278

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

-250.00

Void of 9/06 check

Full Name (Last, First, Middle Initial)

B. Friends Of John Tanner

Mailing Address Post Office Box 1994

City Union City State TN Zip Code 38281

Purpose of Disbursement
Void of 6/06 check

Candidate Name
Rep. John S. Tanner

Office Sought: ☒ House
☐ Senate
☐ President

State: TN District: 8

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

2006 Primary Congres

Transaction ID: 13867260

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

-1000.00

Void of 6/06 check

Full Name (Last, First, Middle Initial)

C. Ed Royce For Congress

Mailing Address P.O. Box 2525

City Orange State CA Zip Code 92859

Purpose of Disbursement
Void of 2/06 check

Candidate Name
Rep. Edward R. Royce

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 40

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

2006 Primary Congres

Transaction ID: 13867226

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

-250.00

Void of 2/06 check

SUBTOTAL of Disbursements This Page (optional)

-1500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Maloney For Congress

Mailing Address 49 East 92nd Street

City New York State NY Zip Code 10128

Purpose of Disbursement
Void of 2/06 checkCandidate Name
Rep. Carolyn B. MaloneyOffice Sought: ☒ House
☐ Senate
☐ President

State: NY District: 14

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

2006 Primary Congres

Transaction ID: 13867228

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	7	

Amount of Each Disbursement this Period

-1000.00

Void of 2/06 check

Full Name (Last, First, Middle Initial)

B. Committee To Re-Elect Vito FossellaMailing Address
PO Box 060248

City Staten Island State NY Zip Code 10312

Purpose of Disbursement
Void of 8/06 checkCandidate Name
Rep. Vito J. FossellaOffice Sought: ☒ House
☐ Senate
☐ President

State: NY District: 13

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

2006 Primary Congres

Transaction ID: 13867263

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	7	

Amount of Each Disbursement this Period

-2000.00

Void of 8/06 check

Full Name (Last, First, Middle Initial)

C. Committee To Re-Elect Vito FossellaMailing Address
PO Box 060248

City Staten Island State NY Zip Code 10312

Purpose of Disbursement
Void of 3/06 checkCandidate Name
Rep. Vito J. FossellaOffice Sought: ☒ House
☐ Senate
☐ President

State: NY District: 13

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

2006 Primary Congres

Transaction ID: 13871317

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	7	

Amount of Each Disbursement this Period

-1000.00

Void of 3/06 check

SUBTOTAL of Disbursements This Page (optional)

-4000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Alan Mollohan For Congress Committee

Mailing Address P. O. Box 1343

City
Fairmont

State
WV

Zip Code
26555

Purpose of Disbursement
Void of 10/06 check

Candidate Name
Rep. Alan B. Mollohan

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼
2006 General Congres

State: WV District: 1

Transaction ID: 13867284

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

-2000.00

Void of 10/06 check

Full Name (Last, First, Middle Initial)

B. Boucher For Congress Committee

Mailing Address PO Box 2000

City
Abingdon

State
VA

Zip Code
24212

Purpose of Disbursement
Void of 9/06 check

Candidate Name
Rep. Rick Boucher

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼
2006 General Congres

State: VA District: 9

Transaction ID: 13867264

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

-500.00

Void of 9/06 check

Full Name (Last, First, Middle Initial)

C. Forbes For Congress

Mailing Address PO Box 15100

City
Chesapeake

State
VA

Zip Code
23328

Purpose of Disbursement
Void of 9/06 check

Candidate Name
Rep. J. Randy Forbes

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼
2006 General Congres

State: VA District: 4

Transaction ID: 13867265

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

-1000.00

Void of 9/06 check

SUBTOTAL of Disbursements This Page (optional)

-3500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Cooper For Congress Committee

Mailing Address

P.O. Box 927

City

Brentwood

State

TN

Zip Code

37024

Purpose of Disbursement

Void of 10/06 check

011

Category/
Type

Candidate Name

Rep. Jim Cooper

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For:

2006

☐

Primary

☐

General

☒

Other (specify) ▼

State: TN

District: 5

2006 General Congres

Transaction ID: 13873763

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	7	

Amount of Each Disbursement this Period

-2000.00

Void of 10/06 check

Full Name (Last, First, Middle Initial)

B. Marsha Blackburn For Congress Inc.

Mailing Address

PO Box 682185

City

Franklin

State

TN

Zip Code

37068

Purpose of Disbursement

Void of 10/06 check

011

Category/
Type

Candidate Name

Rep. Marsha Blackburn

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For:

2006

☐

Primary

☐

General

☒

Other (specify) ▼

State: TN

District: 7

2006 General Congres

Transaction ID: 13867282

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	7	

Amount of Each Disbursement this Period

-1000.00

Void of 10/06 check

Full Name (Last, First, Middle Initial)

C. Tom Feeney For Congress

Mailing Address

1420 Alafaya Trail #103

City

Oviedo

State

FL

Zip Code

32765

Purpose of Disbursement

Contribution

011

Category/
Type

Candidate Name

Rep. Tom Feeney

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

State: FL

District: 24

Transaction ID: 13833825

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	7	

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

-2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Rodney Alexander For Congress Inc.

Mailing Address 319 Nancy Road

City Quitman State LA Zip Code 71268

Purpose of Disbursement

Void of 3/06 check

Candidate Name

Rep. Rodney Alexander

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: LA District: 5

2006 Primary Congres

Transaction ID: 13871318

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

-2000.00

Void of 3/06 check

Full Name (Last, First, Middle Initial)

B. Jim Costa For Congress

Mailing Address 2037 W Bullard Avenue
355

City Fresno State CA Zip Code 93711

Purpose of Disbursement

Contribution

Candidate Name

Rep. James Costa

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 20

Transaction ID: 13833832

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Longhorn PAC

Mailing Address 228 S. Washington St.
Suite B-20

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

Void of 6/06 check

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 13867259

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

-1000.00

Void of 6/06 check

SUBTOTAL of Disbursements This Page (optional)

-2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Sorensen For Congress

Mailing Address PO Box 1661

City
Boise

State
ID

Zip Code
83701

Purpose of Disbursement
Void of 5/06 check

Candidate Name
Shelia Sorensen

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: ID District: 1

2006 Primary Congres

Transaction ID: 13867243

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

-2500.00

Void of 5/06 check

Full Name (Last, First, Middle Initial)

B. New Democrat Coalition Political Action Committee

Mailing Address 607 14th Street NW Suite 800

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
2007 Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 13833820

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

5000.00

2007 Contribution

Full Name (Last, First, Middle Initial)

C. Yarmuth for Congress

Mailing Address 1815 Brownsboro Road
Suite 100

City
Louisville

State
KY

Zip Code
40206

Purpose of Disbursement
Contribution

Candidate Name
John Yarmuth

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 3

Transaction ID: 13835285

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

2000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

63000.00